PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) AMERICA'S BEST COMMITTEE 6063 JACARANDA WAY ADDRESS (number and street) **UNIT F** (Check if address is changed) SANTA BARBARA 93103 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS MARK@MARKMCINTIRE.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) MARKMCINTIRE.COM (Check if address is changed) DATE 2015 C00573048 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. MR. MARK DENNIS MCINTIRE Type or Print Name of Treasurer MR. MARK DENNIS MCINTIRE [Electronically Filed] 02 23 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1** (Revised 06/2012)

Office			For further information contact:
 Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100